

JACKIE CAIVANO MEMORIAL SCHOLARSHIP
SPONSORED BY
SALMON-CHALLIS NATIONAL FOREST EMPLOYEES

General Instructions:

An annual scholarship will be awarded to a graduating student(s) from the high schools at Leadore, Salmon, Challis, or Mackay. Scholarship applications must be on file in the High School Counselors Office by April 11th.

Applicants are required to submit two evaluation reports as part of their application. One evaluation is to be from a teacher the other from a person in the local community in which the student resides. A short essay, as described on the last page of this application, is also required.

A cumulative grade point average of 2.75 is necessary to submit this application.

The recipient must enroll in a post-secondary education, at the school of his/her choice, during the first school year following the award.

For further information contact Betsy Rieffenberger at (208) 756-5108 (Salmon), or Laurie Matthews at (208) 879-4113 (Challis), or Roberta Fadness at (208) 768-2500 (Leadore), or Linda Foster at (208) 588-3408 (Mackay).

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Name _____

Address _____

City, State, Zip _____

Telephone _____

Parent/Guardian _____

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List high school activities and years of participation below:

List community activities, clubs, organizations, etc. below:

GPA: _____

College or university you wish to attend: _____

Have you been accepted? _____

Intended major field of study: _____

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Financial Data - Estimate income and expenditures for one(1) school year.

Avaiable Funds for One Year

Savings	\$ _____
Parent/Family Support	\$ _____
Scholarships	\$ _____
Part Time Employment	\$ _____
Other	\$ _____

Total Income: \$ _____

Expenditures for One School Year

Tuition and Fees	\$ _____
Books and Supplies	\$ _____
Room	\$ _____
Meals	\$ _____
Travel	\$ _____
Clothing	\$ _____
Entertainment	\$ _____
Laundry and Misc.	\$ _____

Total Expenditures: \$ _____

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STUDENT EVALUATION REPORT

APPLICANT: Please complete Section 1 and give this form to a TEACHER, COUNSELOR, or PRINCIPAL, preferably someone who is aware of your achievements.

1. TO BE COMPLETED BY THE APPLICANT. Date _____

Name _____

Address _____

High School _____

Proposed Major _____

2. TO BE COMPLETED BY INDIVIDUAL PROVIDING RECOMMENDATION.

Please evaluate the above student on the following criteria.

Maturity _____

Self Motivation _____

Commitment _____

Responsibility _____

Leadership _____

Judgement _____

Creativity _____

Signature of Evaluator

Title

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STUDENT EVALUATION REPORT

APPLICANT: Please complete Section 1 and give this form to a person OTHER than one of your teachers,(such as local business person, pastor, boss, or anyone who is aware of your achievements/personal character).

1. TO BE COMPLETED BY THE APPLICANT. Date _____

Name _____

Address _____

High School _____

Proposed Major _____

2. TO BE COMPLETED BY INDIVIDUAL PROVIDING RECOMMENDATION.

Please evaluate the above student on the following criteria.

Maturity _____

Self Motivation _____

Commitment _____

Responsibility _____

Leadership _____

Judgement _____

Creativity _____

Signature of Evaluator

Title

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In the space provided below, please answer the following question:

Why are you attending college and how will it benefit your life goals and the community in which you reside?